### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)			FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			
			C C00489799
Check if 24-hour report X 48-hour report	ort New re	port X Amends repo	ort filed on 09 08 2016
Full Name of Payee			Date of Public Distribution/Dissemination
Planned Parenthood Pennsylv	/ania Advocates	5	09 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1514 North 2nd Street, Har	Amount		
0.17	01-1-	7:- 01-	007.50
City Harrisburg	State PA	Zip Code 17102	937.50 Transaction ID : <b>B625134</b>
		17102	Date of Disbursement or Obligation
Purpose of Expenditure Events		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate		<b>x</b> Support	Office Sought: House District:
Hillary Clinton		Oppose	➤ President Senate State: US
Calendar Year-To-Date Per Election for Office Sought		782238.06	Disbursement For: Primary
			Other (specify)
Full Name of Payee Planned Parenthood Pennsylvan	nia Advocates		Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  09 06 2016
Mailing Address 1514 North 2nd Street, H	arrisburg,		03 00 2010
			Amount
City	State	Zip Code	1875.00
Harrisburg	PA	17102	Transaction ID : B625140  Date of Disbursement or Obligation
Purpose of Expenditure		Category/	Man / Dad / Yayayay
Phone Calls		Type 004	_
Name of Federal Candidate		<b>✗</b> Support	Office Sought: House District:
Hillary Clinton		Oppose	President Senate State: US
Calendar Year-To-Date			Disbursement For: Primary X General
Per Election for Office Sought		782238.06	2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Exp	enditures		> 2812.50
(b) SUBTOTAL of Unitemized Independent E	Expenditures		>
(c) TOTAL Independent Expenditures			
. , , , , ,	candidate or authorize	•	not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Deirdre Schifeling	ret	minally Filed!	M = M / D = D / Y = Y = Y
Signature	[Electro	nically Filed] Date	9 09 15 2016

### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
Check if 24-hour report 48-hour report New report Amends report filed of	on 09 / 08 / 2016
Full Name of Payee Planned Parenthood Pennsylvania Advocates	Date of Public Distribution/Dissemination
Trainied Farentinood Fermsylvania Advocates	09 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1514 North 2nd Street, Harrisburg,	Amount
City State Zip Code	937.50
Harrisburg PA 17102	Transaction ID: B625143 Date of Disbursement or Obligation
Purpose of Expenditure Consultant: strategy and messaging  Category/ Type  004	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
Hillary Clinton Oppose	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought  Disbur 2016	sement For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Catalist LLC	09
Mailing Address 1090 Vermont Ave./Ste. 300	Amount
City State Zip Code	325.58
Washington DC 20006	Transaction ID : B625148  Date of Disbursement or Obligation
Purpose of Expenditure Database Services  Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
Hillary Clinton Oppose	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought  Disbur 2016	rsement For: Primary   General  Other (specify)   General
(a) SUBTOTAL of Itemized Independent Expenditures	1263.08
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Deirdre Schifeling  [Electronically Filed] Date 09	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	I EXI END	TONEO		PAGE 3 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report X 48-hour report	New rep	ort 🗶 Amends rep		09 08 2016
Full Name of Payee Community Outreach Group LLC			Date	e of Public Distribution/Dissemination
Mailing Address 1110 Vermont Ave N.W. #300			Amo	09 06 2016 ount
City	State	Zip Code		6418.07
Washington	DC	20005		nsaction ID : B625153 of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004	4	M = M / D = D / Y = Y = Y
Name of Federal Candidate		<b>x</b> Support	Office Soug	ght: House District:
Hillary Clinton		Oppose	<b>✗</b> Presid	dent Senate State: US
Calendar Year-To-Date Per Election for Office Sought	, , ,	782238.06	Disburseme 2016	ent For: Primary <b>x</b> General Other (specify) ▶
Full Name of Payee Community Outreach Group LLC  Mailing Address 1110 Vermont Ave N.W. #300			Date	e of Public Distribution/Dissemination  M M O O O O O O O O O O O O O O O O O
City	State	Zip Code	-	38508.42
Washington	DC	20005		saction ID : B625157 e of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004		M = M / D = D / Y = Y = Y
Name of Federal Candidate		<b>x</b> Support	Office Soug	ght: House District:
Hillary Clinton		Oppose	<b>x</b> Presi	dent Senate State: US
Calendar Year-To-Date Per Election for Office Sought	, , ,	782238.06	Disburseme 2016	ent For: Primary   General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditure	S			44926.49
(b) SUBTOTAL of Unitemized Independent Expenditu	ures		<b>.</b>	1711711
(c) TOTAL Independent Expenditures			···· <b>\</b>	7 7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
Deirdre Schifeling	[Electron	<i>ically Filed]</i> Da	te 09	15 2016
Signature				

Schedule E)	IN EXIEND	TTOTILO		PAGE 4 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	DENTIFICATION NUMBER ▼
Planned Parenthood Votes			С	C00489799
Check if 24-hour report	New rep	ort X Amends repo	ort filed on 09	08 2016
Full Name of Payee Community Outreach Group LLC			Date of Pub	ic Distribution/Dissemination
Mailing Address 1110 Vermont Ave N.W. #300			09 Amount	06 2016
City	State	Zip Code		12836.14
Washington	DC	20005		ID: B625163 oursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004	M = M	/ D = D / Y = Y = Y
Name of Federal Candidate		Support	Office Sought:	House District:
Hillary Clinton		Oppose	<b>✗</b> President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought	.,,	782238.06	Disbursement For: 2016 Other (s	Primary <b>✗</b> General
Full Name of Payee			Date of Pub	lic Distribution/Dissemination
Community Outreach Group LLC			M M M 09	/ D D / Y Y Y Y Y Y Y 2016
Mailing Address 1110 Vermont Ave N.W. #300			Amount	06 2016
City	State	Zip Code	مبسال ا	25672.28
Washington	DC	20005	Transaction Date of Disk	ID: B625165 oursement or Obligation
Purpose of Expenditure Events		Category/ Type 004	M = M	/ D = D / Y = Y = Y
Name of Federal Candidate		<b>✗</b> Support	Office Sought:	House District:
Hillary Clinton		Oppose	<b>✗</b> President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought		782238.06	Disbursement For: 2016 Other (s	Primary <b>✗</b> General specify) ▶
(a) SUBTOTAL of Itemized Independent Expendi	tures		•	38508.42
(b) SUBTOTAL of Unitemized Independent Exper	nditures		. •	7
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the indepe with, or at the request or suggestion of, any cand party committee) any political party committee or	lidate or authorized			
Deirdre Schifeling Signature	[Electron	nically Filed] Date	9 09 15	2016
3. <del>3</del>				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
Check if 24-hour report 48-hour report New report Amends report filed o	on 09 08 2016
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund	Date of Public Distribution/Dissemination
·	09 06 2016
Mailing Address 7155 E. 38th Avenue	Amount
City State Zip Code	1241.10
	Transaction ID : B625166 Date of Disbursement or Obligation
Purpose of Expenditure Events  Category/ Type  004	M M M / D D / Y Y Y Y
Name of Federal Candidate  Support  Office 9	Sought: House District:
Hillary Clinton Oppose x F	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought  Disburs 2016	sement For: Primary   General  Other (specify) ▶
	Date of Public Distribution/Dissemination
Planned Parenthood Rocky Mountains Action Fund	09 06 2016
Mailing Address 7155 E. 38th Avenue	Amount
City State Zip Code	1861.66
2011/01	Transaction ID : B625169
Purpose of Expenditure Phone Calls  Category/ Type  004	Date of Disbursement or Obligation
Name of Federal Candidate  Support  Office	Sought: House District:
Hillary Clinton	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought  Disburs 2016	sement For: Primary   General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3102.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Deirdre Schifeling  [Electronically Filed] Date	15 2016
Signature	

Schedule E)	ENDERT EXICION	TOTILS	PAGE 6 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			C C00489799
Check if 24-hour report <b>X</b> 48-hour	report New report	ort X Amends repo	rt filed on 09 08 2016
Full Name of Payee Planned Parenthood Rocky	/ Mountains Action	Fund	Date of Public Distribution/Dissemination
Mailing Address 7155 E. 38th Avenue			09 06 2016  Amount
City  Denver	State	Zip Code 80207	620.55 Transaction ID : B625172
Purpose of Expenditure Canvassing		Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate		<b>✗</b> Support	Office Sought: House District:
Hillary Clinton		Oppose	resident Senate State: US
Calendar Year-To-Date Per Election for Office Sought		782238.06	Disbursement For:  Primary  General 2016  Other (specify) ▶
Full Name of Payee Planned Parenthood Rocky	Mountains Action Fun	nd	Date of Public Distribution/Dissemination
Mailing Address 7155 E. 38th Avenue	<b>3</b>		09 06 2016  Amount
City	State	Zip Code	310.27
Denver	CO	80207	Transaction ID : B625177  Date of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate Hillary Clinton		<b>✗</b> Support	Office Sought: House District: US
		Oppose	✗   President   Senate   State:     Disbursement For:   Primary     ✗   General
Calendar Year-To-Date Per Election for Office Sought		782238.06	2016 Other (specify)
(a) SUBTOTAL of Itemized Independent	Expenditures		930.82
(b) SUBTOTAL of Unitemized Independent	ent Expenditures		<b>&gt;</b>
(c) TOTAL Independent Expenditures			<b>&gt;</b>
	any candidate or authorized		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Deirdre Schifeling Signature	[Electron	ically Filed] Date	09 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

_	1609159030821268 DUR REPORT OF INDEPI	FNDFNT FXPENDI	ITURES		
Schedule					PAGE 7 OF 36 FOR SE OF FORM 24/48
	COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
	ed Parenthood Votes				C C00489799
					0 000403733
Check if	24-hour report <b>X</b> 48-hour re	report New repo	ort X Amends repor		09 / 08 / 2016
Full Nam Plan	ame of Payee nned Parenthood Advoca	ates Mar Monte			of Public Distribution/Dissemination
Mailing	Address 1605 The Alameda			Amou	
City		State	Zip Code		897.90
San Jo	ose	CA	95126		saction ID : B625179 of Disbursement or Obligation
	ee of Expenditure teer Recruitment		Category/ Type 004		M M / D D / Y Y Y Y Y
Name (	of Federal Candidate		<b>✗</b> Support	Office Sough	ht: House District:
Hillary	Clinton		Oppose	resid	
	alendar Year-To-Date er Election for Office Sought		782238.06	Disbursemer 2016	nt For: Primary   General  Other (specify) ▶
Full Na	ame of Payee				of Public Distribution/Dissemination
	ned Parenthood Advocate	s Mar Monte			09 06 2016
Mailing	Address 1605 The Alameda			Amor	
City		State	Zip Code	-	748.25
San Jo	ose	CA	95126		action ID : B625187 of Disbursement or Obligation
Purpose Phone	se of Expenditure e Calls		Category/ Type 004		M = M / D = D / Y = Y = Y
Name	of Federal Candidate		<b>✗</b> Support	Office Soug	ht: House District:
Hillary	Clinton		Oppose	<b>x</b> Presid	
	alendar Year-To-Date er Election for Office Sought		782238.06	Disburseme 2016	ent For: Primary General  Other (specify)
(a) SUB	BTOTAL of Itemized Independent E	xpenditures		· <b>&gt;</b>	1646.15
(b) SUB	STOTAL of Unitemized Independen	it Expenditures		. •	7 7
(c) TOT	TAL Independent Expenditures			•	4 1 4 1 4
Under p	enalty of perjury I certify that the	independent expenditures	reported herein were	not made in	cooperation, consultation, or concert

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling	[Electronically Filed]	Date	<sup>M</sup> 9	/	15	/	2016
Signature							

24/48 HOUR REPORT OF INDEPE Schedule E)	NDENI EXPEND	IIUKES		PAGE 8 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report <b>X</b> 48-hour re	port New repo	ort X Amends repo	ort filed on	09 08 2016
Full Name of Payee			Date	of Public Distribution/Dissemination
Planned Parenthood Advoca	tes Mar Monte			09 06 2016
Mailing Address 1605 The Alameda			Amo	unt
City	State	Zip Code		1346.85
San Jose	CA	95126		saction ID : B625188
Purpose of Expenditure Canvassing		Category/ Type 004		of Disbursement or Obligation
Name of Federal Candidate		Common and	Office Court	ht. Have Dietviet
Hillary Clinton		Support Oppose	Office Soug	
		Оррозс	<b>✗</b> Presid	
Calendar Year-To-Date Per Election for Office Sought		782238.06	2016	Other (specify)
Full Name of Payee Community Outreach Group LL  Mailing Address 1110 Vermont Ave N.W.  City		Zip Code	Date	of Public Distribution/Dissemination  M 09
Washington	DC	20005		action ID : B625105
Purpose of Expenditure Canvassing		Category/ Type 004	Date	of Disbursement or Obligation
Name of Federal Candidate		<b>x</b> Support	Office Soug	ht: House District:
Hillary Clinton		Oppose	<b>X</b> Presid	dent Senate State: US
Calendar Year-To-Date Per Election for Office Sought		782238.06	Disburseme 2016	ont For:
<ul><li>(a) SUBTOTAL of Itemized Independent Ex</li><li>(b) SUBTOTAL of Unitemized Independent</li></ul>				86965.11
(c) TOTAL Independent Expenditures			· [	
Under penalty of perjury I certify that the i with, or at the request or suggestion of, an party committee) any political party committee	y candidate or authorized			
Deirdre Schifeling			M = M /	D = D / Y = Y = Y
Signature	[Electron	ically Filed] Date	9 09	15 2016

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	Siledule Ly	FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Ρ	Planned Parenthood Votes	C C00489799
Ch	neck if 24-hour report <b>X</b> 48-hour report New report <b>X</b> Amends report file	ed on 09 08 2016
	Full Name of Payee	Date of Public Distribution/Dissemination
	Planned Parenthood Advocates of Ohio	09 06 2016
	Mailing Address 206 E State St.	Amount
	City State Zip Code	3237.54
	Columbus OH 43215	Transaction ID : B625109 Date of Disbursement or Obligation
	Purpose of Expenditure Phone Calls  Category/ Type  004	M = M / D = D / Y = Y = Y
	Name of Federal Candidate Support Off	ice Sought: House District:
	Hillary Clinton	President Senate State: US
	Calendar Year-To-Date Per Election for Office Sought  782238.06  Dis 201	
		Other (specify) ▶
	Full Name of Payee Planned Parenthood Advocates of Ohio	Date of Public Distribution/Dissemination
	Mailing Address 206 E State St.	09 06 2016  Amount
	City State Zip Code	6475.07
	Columbus OH 43215	Transaction ID : B625113  Date of Disbursement or Obligation
	Purpose of Expenditure Canvassing  Category/ Type  004	M = M / D = D / Y = Y = Y
	Name of Federal Candidate Support Off	ice Sought: House District:
	Hillary Clinton Oppose	President Senate State: US
	Calendar Year-To-Date Per Election for Office Sought  Dis 20	bursement For: Primary General  Other (specify)   General
	(a) SUBTOTAL of Itemized Independent Expenditures	9712.61
	(b) SUBTOTAL of Unitemized Independent Expenditures	
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
	Deirdre Schifeling [Electronically Filed] Date	09 15 2016
	Signature	

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OF

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#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

PAGE 36 10 OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Planned Parenthood Votes C00489799 **✗** 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 80 Full Name of Payee Date of Public Distribution/Dissemination Planned Parenthood Advocates of Ohio 09 2016 06 Mailing Address 206 E State St. Amount State Zip Code City 4316.71 OH 43215 Transaction ID: B625118 Columbus Date of Disbursement or Obligation Purpose of Expenditure Category/ **Events** 004 Type Name of Federal Candidate Office Sought: **✗** Support House District: Hillary Clinton US Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 2016 782238.06 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Community Outreach Group LLC 09 06 2016 Mailing Address 1110 Vermont Ave N.W. #300 Amount City State Zip Code 100000.00 DC 20005 Transaction ID: B625129 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 Canvassing Type Name of Federal Candidate **✗** Support Office Sought: House District: Hillary Clinton US Oppose **X** President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 2016 782238.06 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 104316.71 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Deirdre Schifeling [Electronically Filed] 09 15 2016 Date Signature

Schedule E)	INDENT EXICIO	TOTILO	PAGE 11 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			C C00489799
Check if 24-hour report 48-hour re	port New rep	ort X Amends repo	rt filed on 09 08 2016
Full Name of Payee Planned Parenthood Advoca	tes Mar Monte		Date of Public Distribution/Dissemination
Mailing Address 1605 The Alameda			09 06 2016 Amount
City	State	Zip Code	1346.85
San Jose	CA	95126	Transaction ID : B625191 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004	M M M / D D / Y Y Y Y Y
Name of Federal Candidate		<b>x</b> Support	Office Sought: House District:
Catherine Cortez-Masto		Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		148161.03	Disbursement For:
Full Name of Payee Planned Parenthood Rocky Mo	ountains Action Fur	nd	Date of Public Distribution/Dissemination
Mailing Address 7155 E. 38th Avenue			09 06 2016  Amount
City	State	Zip Code	1861.67
Denver	CO	80207	Transaction ID : B625168  Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate		<b>x</b> Support	Office Sought: House District:
Catherine Cortez-Masto		Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		148161.03	Disbursement For:
(a) SUBTOTAL of Itemized Independent E:	xpenditures		3208.52
(b) SUBTOTAL of Unitemized Independent	Expenditures		<b>&gt;</b>
(c) TOTAL Independent Expenditures			<b>•</b>
	y candidate or authorized		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Deirdre Schifeling Signature	[Electron	ically Filed] Date	09 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)		FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
Planned Parenthood Votes		C C00489799			
		g to to to			
Check if 24-hour report 48-hour report New report	ort X Amends report filed	on 09 / 08 / 2016			
Full Name of Payee Planned Parenthood Advocates Mar Monte		Date of Public Distribution/Dissemination  M M O O O O O O O O O O O O O O O O O			
Mailing Address 1605 The Alameda	Mailing Address 1605 The Alameda				
City State	Zip Code	897.90			
San Jose CA	95126	Transaction ID : B625183 Date of Disbursement or Obligation			
Purpose of Expenditure Volunteer Recruitment	Category/ Type 004	M M / D D / Y Y Y Y Y			
Name of Federal Candidate	<b>x</b> Support Office	Sought: House District:			
Catherine Cortez-Masto	Oppose	President Senate State: NV			
Calendar Year-To-Date Per Election for Office Sought	148161.03 Disbu 2016	rrsement For: Primary   General  Other (specify) ▶			
Full Name of Payee Planned Parenthood Advocates Mar Monte		Date of Public Distribution/Dissemination			
Mailing Address 1605 The Alameda		09 06 2016 Amount			
		Amount			
City State	Zip Code	748.25			
San Jose CA	95126	Transaction ID : B625184  Date of Disbursement or Obligation			
Purpose of Expenditure Phone Calls	Category/ Type 004	M = M / D = D / Y = Y = Y			
Name of Federal Candidate	<b>✗</b> Support Office	e Sought: House District:			
Catherine Cortez-Masto	Oppose	President Senate State: NV			
Calendar Year-To-Date Per Election for Office Sought	148161.03 Disbu 2016	ursement For: Primary   General  Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures					
(a) SOUTOTAL OF REMIZED HUMPEHDERIC EXPENDICULES	•	1646.15			
(b) SUBTOTAL of Unitemized Independent Expenditures	····				
(c) TOTAL Independent Expenditures	·····				
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•	•			
	ically Filed] Date 0	9 15 2016			
Signature	_				

Schedule E)	ENDENT EXPENDI	TOTILS	PAGE 13 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			C C00489799
Check if 24-hour report <b>x</b> 48-hour	report New report	ort X Amends repo	rt filed on 09 08 2016
Full Name of Payee Planned Parenthood Rocky	/ Mountains Action	Fund	Date of Public Distribution/Dissemination
Mailing Address 7155 E. 38th Avenue			09 06 2016  Amount
City  Denver	State CO	Zip Code 80207	620.56 Transaction ID : B625174
Purpose of Expenditure Canvassing		Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate		x Support	Office Sought: House District:
Catherine Cortez-Masto		Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		148161.03	Disbursement For:  Primary  General 2016  Other (specify) ▶
Full Name of Payee Planned Parenthood Rocky	Mountains Action Fun	ıd	Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  09
Mailing Address 7155 E. 38th Avenue			Amount
City	State	Zip Code	310.27
Denver	СО	80207	Transaction ID : B625175  Date of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate		<b>x</b> Support	Office Sought: House District:
Catherine Cortez-Masto		Oppose	President X Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		148161.03	Disbursement For:
(a) SUBTOTAL of Itemized Independent	Expenditures		930.83
(b) SUBTOTAL of Unitemized Independent	ent Expenditures		·
(c) TOTAL Independent Expenditures			<b>&gt;</b>
	any candidate or authorized		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Deirdre Schifeling Signature	[Electron	ically Filed] Date	09 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Schedule E)	II EXPEND			PAGE 14 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report <b>X</b> 48-hour report	New rep	ort X Amends repo		09 08 2016
Full Name of Payee Community Outreach Group LLC				of Public Distribution/Dissemination
Mailing Address 1110 Vermont Ave N.W. #300			Amou	09 06 2016 nt
City	State	Zip Code		6418.07
Washington	DC	20005		saction ID: B625152 of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004		
Name of Federal Candidate		<b>X</b> Support	Office Sough	nt: House District:
Catherine Cortez-Masto		Oppose	Preside	ent Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	, ,	148161.03	Disbursemen 2016	nt For:
Full Name of Payee	_		Date	of Public Distribution/Dissemination
Community Outreach Group LLC				09
Mailing Address 1110 Vermont Ave N.W. #300			Amou	ınt
City	State	Zip Code		12836.14
Washington	DC	20005		action ID : B625162 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		/ D D / Y Y Y Y
Name of Federal Candidate		<b>✗</b> Support	Office Sough	nt: House District:
Catherine Cortez-Masto		Oppose	Presid	ent Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7	148161.03	Disbursemer 2016	nt For:
(a) SUBTOTAL of Itemized Independent Expenditur	es			19254.21
				7 7 7
(b) SUBTOTAL of Unitemized Independent Expendi	tures		•	7 7 7
(c) TOTAL Independent Expenditures			•	171171
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Deirdre Schifeling Signature	[Electron	ically Filed] Date	9 09	15 / 2016

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Sc	chedule E)	110.	1101120		PAGE 15 OF 36 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)	_			FEC IDENTIFICATION NUMBER ▼
PI	lanned Parenthood Votes				C C00489799
Che	eck if 24-hour report 48-hour report New	v repo	ort 🗶 Amends repo	ort filed o	on 09 / 08 / 2016
T	Full Name of Payee Community Outreach Group LLC				Date of Public Distribution/Dissemination
-	Mailing Address 1110 Vermont Ave N.W. #300				09 06 2016 Amount
ŀ	City State		Zip Code		38508.42
	Washington DC		20005		Transaction ID : B625159 Date of Disbursement or Obligation
	Purpose of Expenditure Phone Calls		Category/ Type 004		M M / D D / Y Y Y Y
ŀ	Name of Federal Candidate		<b>x</b> Support	Office	Sought: House District:
	Catherine Cortez-Masto		Oppose		President X Senate State: NV
	Calendar Year-To-Date Per Election for Office Sought	7	148161.03	Disbur 2016	sement For: Primary   General  Other (specify)
	Full Name of Payee Catalist LLC  Mailing Address 1090 Vermont Ave./Ste. 300				Date of Public Distribution/Dissemination
	1000 Volimont / Vol./Oto. 000				Amount
	City State Washington DC		Zip Code 20006	-	325.58  Transaction ID : B625146  Date of Disbursement or Obligation
-	Purpose of Expenditure Database Services		Category/ Type 004		M M / D D / Y Y Y Y
ľ	Name of Federal Candidate		<b>x</b> Support	Office	Sought: House District:
	Catherine Cortez-Masto		Oppose		President Senate State: NV
	Calendar Year-To-Date Per Election for Office Sought		148161.03	Disbur 2016	rsement For: Primary   General  Other (specify)
(	(a) SUBTOTAL of Itemized Independent Expenditures			•	38834.00
(	(b) SUBTOTAL of Unitemized Independent Expenditures			·· •	
(	(c) TOTAL Independent Expenditures			·· •	
٧	Under penalty of perjury I certify that the independent expendit with, or at the request or suggestion of, any candidate or authoparty committee) any political party committee or its agent.				
		ctron	ically Filed] Date	) M 09	M / D D / Y D Y D D D D D D D D D D D D D
	Signature				

Schedule E)	NDENT EXPEND	ITONES		PAGE 16 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
Planned Parenthood Votes			C	C00489799
Check if 24-hour report 🗶 48-hour report	ort New rep	ort X Amends repo	rt filed on 09	08 2016
Full Name of Payee Community Outreach Group L	I C			c Distribution/Dissemination
·			09	06 2016
Mailing Address 1110 Vermont Ave N.W. #3	600		Amount	
City	State	Zip Code		6418.07
Washington	DC	20005	Transaction	
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004		/ D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
Joseph Heck		<b>X</b> Oppose	President	Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		200968.40	Disbursement For: 2016 Other (sp	Primary <b>✗</b> General pecify) ▶
Full Name of Payee			Date of Publi	c Distribution/Dissemination
Catalist LLC			M M M 09	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1090 Vermont Ave./Ste.	300		Amount	
City	State	Zip Code		325.58
Washington	DC	20006	Transaction II  Date of Disbu	D: B625145 ursement or Obligation
Purpose of Expenditure Database Services		Category/ Type 004	M = M	/ D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
Joseph Heck		X Oppose	President	Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		200968.40	Disbursement For: 2016 Other (sp	Primary <b>X</b> General Decify) ▶
(a) SUBTOTAL of Itemized Independent Exp	enditures			6743.65
			-	7 7
(b) SUBTOTAL of Unitemized Independent E	Expenditures		• •	7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Deirdre Schifeling	[Electron	ically Filed] Date	09 / 15	2016
Signature				

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

ooneddie Ej	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
Check if 24-hour report 48-hour report New report Amends report filed of	on 09 / 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Community Outreach Group LLC	09 06 2016
Mailing Address 1110 Vermont Ave N.W. #300	Amount
City State Zip Code	38508.42
Washington DC 20005	Transaction ID : B625160 Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls  Category/ Type  004	M M / D D / Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
Joseph Hock	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought  Disburs 200968.40  Disburs 2016	sement For: Primary ★ General  Other (specify) ▶
Full Name of Payee Community Outreach Group LLC  Mailing Address 1110 Vermont Ave N.W. #300	Date of Public Distribution/Dissemination  09 06 2016  Amount
City State Zip Code	12836.14
	Transaction ID : B625161
Purpose of Expenditure Canvassing  Category/ Type  004	Date of Disbursement or Obligation
Name of Federal Candidate Support Office	Sought: House District:
	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought  Disbur 2016	rsement For: Primary <b>X</b> General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	51344.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Deirdre Schifeling [Electronically Filed] Date 09	
Signature	

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OF

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### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)		FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
Planned Parenthood Votes		C C00489799		
Check if 24-hour report 48-hour report New report	t X Amends report filed on	09 08 2016		
Full Name of Payee Planned Parenthood Rocky Mountains Action F	Da	te of Public Distribution/Dissemination		
·	una	09 06 2016		
Mailing Address 7155 E. 38th Avenue	Am	nount		
City State Z	lip Code	310.27		
Denver CO 8		ansaction ID : B625176 te of Disbursement or Obligation		
Purpose of Expenditure Volunteer Recruitment	Category/ Type 004	M M / D D / Y Y Y Y		
Name of Federal Candidate	Support Office Sou	ught: House District:		
Joseph Heck	X Oppose Pres	sident Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought	Disbursen 2016	nent For:  Primary		
Full Name of Payee		te of Public Distribution/Dissemination		
Planned Parenthood Rocky Mountains Action Fund				
Mailing Address 7155 E. 38th Avenue	Δη	nount		
	Zip Code	620.55		
	00201	te of Disbursement or Obligation		
Purpose of Expenditure Canvassing	Category/ Type 004	M = M / D = D / Y = Y = Y		
Name of Federal Candidate	Support Office So	ught: House District:		
Joseph Heck	X Oppose Pre	sident Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought	200968.40 Disbursen 2016	nent For: Primary General  Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures	······	930.82		
(b) SUBTOTAL of Unitemized Independent Expenditures	······			
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·			
Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.	•	· · · · · · · · · · · · · · · · · · ·		
Deirdre Schifeling [Electronica	ally Filed] Date 09	/ D D / Y Y Y Y Y Y 15 2016		
Signature				

Schedule E)	ENDENT EXTEND	TOTILO	PA( FO	GE 19 OF 36 R SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				TIFICATION NUMBER ▼
Planned Parenthood Votes			C coo.	489799
Check if 24-hour report X 48-hour r	eport New rep	ort X Amends repo	rt filed on 09	08 2016
Full Name of Payee Planned Parenthood Rocky	Mountains Action	Fund	M M / D	stribution/Dissemination
Mailing Address 7155 E. 38th Avenue			09 Amount	2016
City	State CO	Zip Code 80207	Transaction ID : E	1861.66 <b>3625167</b>
Purpose of Expenditure Phone Calls		Category/ Type 004	Date of Disbursen	nent or Obligation
Name of Federal Candidate		Support	Office Sought:	ouse District:
Joseph Heck		<b>x</b> Oppose	President X S	enate State: NV
Calendar Year-To-Date Per Election for Office Sought		200968.40	Disbursement For: 2016 Other (specify	Primary <b>X</b> General
Full Name of Payee Planned Parenthood Advocate	es Mar Monte		Date of Public Dis	stribution/Dissemination
Mailing Address 1605 The Alameda			Amount	2010
City	State	Zip Code		748.25
San Jose	CA	95126	Transaction ID : B Date of Disburser	
Purpose of Expenditure Phone Calls		Category/ Type 004	M = M / D	/ Y = Y = Y
Name of Federal Candidate		Support	Office Sought:	louse District:
Joseph Heck		<b>x</b> Oppose	President X S	Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	,,	200968.40	Disbursement For: 2016 Other (specify	Primary <b>X</b> General
(a) SUBTOTAL of Itemized Independent E	Expenditures		·	2609.91
(b) SUBTOTAL of Unitemized Independen	nt Expenditures		•	
(c) TOTAL Independent Expenditures			·	7
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party commit	ny candidate or authorized			
Deirdre Schifeling Signature	[Electron	ically Filed] Date	09 15	2016

Schedule E)	ENDERT EXILIT	TOTILO	PAGE 20 FOR SE OF FO	OF 36 DRM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION	
Planned Parenthood Votes			C C00489799	
Check if 24-hour report X 48-hour	report New rep	ort X Amends repo	rt filed on 09 08 / Y	2016
Full Name of Payee Planned Parenthood Advoc	cates Mar Monte		Date of Public Distribution/Dis	YYYY
Mailing Address 1605 The Alameda			09	2016
City San Jose	State CA	Zip Code 95126	Transaction ID : B625182	897.90
Purpose of Expenditure Volunteer Recruitment		Category/	Date of Disbursement or Obli	gation
Name of Federal Candidate		Type 004 Support	Office Sought: House Dis	trict:
Joseph Heck		<b>X</b> Oppose	President X Senate S	tate: NV
Calendar Year-To-Date Per Election for Office Sought		200968.40	Disbursement For: Primary 2016 Other (specify) ▶	<b>✗</b> General
Full Name of Payee Planned Parenthood Advoca	tes Mar Monte		Date of Public Distribution/Dis	ssemination 2016
Mailing Address 1605 The Alameda			Amount	2010
City	State	Zip Code		1346.85
San Jose	CA	95126	Transaction ID : B625190 Date of Disbursement or Obli	gation
Purpose of Expenditure Canvassing		Category/ Type 004	M - M / D - D / Y	/
Name of Federal Candidate		Support	Office Sought: House Dis	strict:
Joseph Heck		<b>x</b> Oppose	President Senate S	State: NV
Calendar Year-To-Date Per Election for Office Sought	, ,	200968.40	Disbursement For:  Primary 2016  Other (specify) ▶	<b>✗</b> General
(a) SUBTOTAL of Itemized Independent	Expenditures		•	2244.75
(b) SUBTOTAL of Unitemized Independent	ent Expenditures		<b>•</b>	
(c) TOTAL Independent Expenditures			<b>&gt;</b>	
Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorized			
Deirdre Schifeling Signature	[Electron	ically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	silicatic Ly	FOR SE OF FORM 24/48
	AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
۲	Planned Parenthood Votes	C C00489799
Ch	neck if 24-hour report 🗶 48-hour report New report 🗶 Amends report file	d on 09 08 2016
	Full Name of Payee	Date of Public Distribution/Dissemination
	Community Outreach Group LLC	09 06 2016
	Mailing Address 1110 Vermont Ave N.W. #300	Amount
	City State Zip Code	100000.00
	Washington DC 20005	Transaction ID : B625130 Date of Disbursement or Obligation
	Purpose of Expenditure Canvassing  Category/ Type 004	M M / D D / Y Y Y Y
	Name of Federal Candidate Support Offic	ce Sought: House District:
	Katie McGinty Oppose	President Senate State: PA
	Galeriaar Tour to Bate	pursement For: Primary
	Per Election for Office Sought 199232.67 201	Other (specify)
	Full Name of Payee Planned Parenthood Pennsylvania Advocates	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1514 North 2nd Street, Harrisburg,	09 06 2016  Amount
	City State Zip Code	937.50
	Harrisburg PA 17102	Transaction ID : B625192 Date of Disbursement or Obligation
	Purpose of Expenditure Consultant: strategy and messaging  Category/ Type  004	M M / D D / Y Y Y Y
	Name of Federal Candidate Support Offi	ce Sought: House District:
	Katie McGinty Oppose	President Senate State: PA
	Calendar Year-To-Date Per Election for Office Sought  Dis 201	bursement For: Primary   General  Other (specify)   Other
	(a) SUBTOTAL of Itemized Independent Expenditures	100937.50
	(b) SUBTOTAL of Unitemized Independent Expenditures	
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were not newth, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
	Deirdre Schifeling  [Electronically Filed] Date	09 15 2016
	Signature	
_		

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Schedule E)	ENDENT EXICED	TOTILO	-	PAGE 22 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Planned Parenthood Votes			C	C00489799
Check if 24-hour report 48-hour	report New report	ort X Amends repo	rt filed on 09	08 2016
Full Name of Payee Planned Parenthood Penns	ylvania Advocates		M = M /	Distribution/Dissemination
Mailing Address 1514 North 2nd Street,	Harrisburg,		Amount	06 2016
City	State	Zip Code		1875.00
Harrisburg	PA	17102	Transaction II  Date of Disbut	
Purpose of Expenditure Phone Calls		Category/ Type 004	M = M /	D D / Y Y Y Y Y
Name of Federal Candidate		<b>✗</b> Support	Office Sought:	House District:
Katie McGinty		Oppose	President X	Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		199232.67	Disbursement For: 2016 Other (spe	Primary <b>✗</b> General ecify) ▶
Full Name of Payee			Date of Public	Distribution/Dissemination
Planned Parenthood Pennsyl	vania Advocates		09	06 / 2016
Mailing Address 1514 North 2nd Stree	t, Harrisburg,		Amount	
City	State	Zip Code		937.50
Harrisburg	PA	17102	Transaction ID  Date of Disbu	: B625135 rsement or Obligation
Purpose of Expenditure Events		Category/ Type 004	M = M /	D D / Y Y Y Y
Name of Federal Candidate		<b>x</b> Support	Office Sought:	House District:
Katie McGinty		Oppose	President	Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		199232.67	Disbursement For: 2016 Other (sp	Primary <b>X</b> General ecify) ▶
(a) SUBTOTAL of Itemized Independent	Expenditures		<b>•</b>	2812.50
(b) SUBTOTAL of Unitemized Independe	nt Expenditures		• •	
(c) TOTAL Independent Expenditures			•	1 7 1 2
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized			
Deirdre Schifeling Signature	[Electron	ically Filed] Date	09 / 15	2016

### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes		C C00489799
		<u> </u>
Check if 24-hour report 48-hour report New	report X Amends report filed on	09 08 2016
Full Name of Payee Planned Parenthood Advocates of Ohio	_	of Public Distribution/Dissemination
		09 06 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 206 E State St.	Amou	unt
City State	Zip Code	6475.07
Columbus OH		saction ID : B625117 of Disbursement or Obligation
Purpose of Expenditure Canvassing		M M / D D / Y Y Y Y
Name of Federal Candidate	Support Office Sough	ht: House District:
Rob Portman	X Oppose Presid	dent Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	Disbursement 2016	nt For:  Primary
Full Name of Payee	Date	of Public Distribution/Dissemination
Community Outreach Group LLC		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W. #300	Amor	unt
City State	Zip Code	85618.25
Washington DC	20000	saction ID : B625107 of Disbursement or Obligation
Purpose of Expenditure Canvassing		M M / D D / Y Y Y Y
Name of Federal Candidate	Support Office Soug	ht: House District:
Rob Portman	M Oppose Presid	
Calendar Year-To-Date Per Election for Office Sought	403226.74 Disburseme 2016	ent For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	······································	92093.32
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	
Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authori party committee) any political party committee or its agent.	•	• •
Deirdre Schifeling [Elect	ronically Filed] Date 09	15 2016
Signature		

Schedule E)	FENDENI EXPEND	ITOTILO	-	PAGE 24 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Planned Parenthood Votes			C	C00489799
Check if 24-hour report X 48-hour	report New report	ort X Amends repo	ort filed on 09	08 2016
Full Name of Payee Planned Parenthood Advo	cates of Ohio		M = M /	Distribution/Dissemination
Mailing Address 206 E State St.			Amount	06 2016
City	State OH	Zip Code 43215	Transaction II	3237.54 D : <b>B625112</b>
Purpose of Expenditure Phone Calls		Category/ Type 004	Date of Disbu	rsement or Obligation
Name of Federal Candidate		Support	Office Sought:	House District:
Rob Portman		<b>x</b> Oppose	President X	Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		403226.74	Disbursement For: 2016 Other (spe	Primary <b>✗</b> General ecify) ▶
Full Name of Payee Planned Parenthood Advoca	tes of Ohio		Date of Public	Distribution/Dissemination  Distribution/Dissemination  Distribution/Dissemination
Mailing Address 206 E State St.			Amount	
City	State	Zip Code		3237.53
Columbus	ОН	43215	Transaction ID  Date of Disbu	D: B625111 rsement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004	M = M /	D D / Y Y Y Y Y
Name of Federal Candidate		<b>✗</b> Support	Office Sought:	House District:
Ted Strickland		Oppose	President	Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		400012.74	Disbursement For: 2016 Other (sp	Primary <b>✗</b> General ecify) ▶
(a) SUBTOTAL of Itemized Independent	Expenditures		·	6475.07
(b) SUBTOTAL of Unitemized Independ	ent Expenditures			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party committee.	any candidate or authorized			
Deirdre Schifeling Signature	[Electron	ically Filed] Date	9 09 15	2016

Signature

# (

4/48 HOUR REPORT OF INDEPENDENT EXPENDIT	URES	PAGE 25 OF 36
Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼
Planned Parenthood votes		C C00489799
Check if 24-hour report 48-hour report New report	* Amends report filed of	on 09 / 08 / 2016
Full Name of Payee Planned Parenthood Advocates of Ohio		Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 206 E State St.		Amount
City State Zi	ip Code	6475.07
Columbus OH 43	3215	Transaction ID : B625116 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing	Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate	<b>x</b> Support Office	Sought: House District:
Ted Strickland		President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	Disbur 2016	rsement For: Primary Seneral  Other (specify)
Full Name of Payee Community Outreach Group LLC  Mailing Address 1110 Vermont Ave N.W. #300		Date of Public Distribution/Dissemination  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zi	ip Code	85618.26
		Transaction ID : B625106 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing	Category/ Type 004	M M / D D / Y Y Y Y Y
Name of Federal Candidate	<b>✗</b> Support Office	Sought: House District:
Ted Strickland		President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	Disbur 2016	rsement For: Primary   General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	······ ►	92093.33
(b) SUBTOTAL of Unitemized Independent Expenditures	······	7
(c) TOTAL Independent Expenditures	<b>•</b>	
Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized corparty committee) any political party committee or its agent.		
Deirdre Schifeling [Electronica	ally Filed] Date 09	M / D D / Y B Y B Y B Y B Y B Y B Y B Y B Y B Y

Schedule E)	TOTILO	PAGE 26 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes		C C00489799
Check if 24-hour report 48-hour report New report	ort X Amends report file	d on 09 08 2016
Full Name of Payee Community Outreach Group LLC		Date of Public Distribution/Dissemination
Mailing Address 1110 Vermont Ave N.W. #300		09 06 2016 Amount
City State Washington DC	Zip Code 20005	100000.00 Transaction ID : B625131
Purpose of Expenditure Canvassing	Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate	Support Office	ee Sought: House District:
Pat Toomey	<b>X</b> Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	1910272.56 Disk 2016	oursement For: Primary General  Other (specify)
Full Name of Payee Planned Parenthood Pennsylvania Advocates		Date of Public Distribution/Dissemination  09  06  08  09  08
Mailing Address 1514 North 2nd Street, Harrisburg,		Amount
City State	Zip Code	937.50
Harrisburg PA  Purpose of Expenditure	17102	Transaction ID : B625136  Date of Disbursement or Obligation
Events	Category/ Type 004	M = M / D = D / Y = Y = Y = Y
Name of Federal Candidate  Pat Toomey		be Sought: House District:
Calendar Year-To-Date Per Election for Office Sought	Y Oppose Dist 201	pursement For: Primary  General
Tel Election for Cinec Sought	11.21	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	·····	100937.50
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Deirdre Schifeling [Electronic Signature	. 17 17:17 17	09 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

PAGE 36 27 OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Planned Parenthood Votes C00489799 **✗** 48-hour report New report | X | Amends report filed on Check if 24-hour report 09 2016 08 Full Name of Payee Date of Public Distribution/Dissemination Planned Parenthood Pennsylvania Advocates 2016 09 06 Mailing Address 1514 North 2nd Street, Harrisburg, Amount State Zip Code City 1875.00 PΑ 17102 Transaction ID: B625138 Harrisburg Date of Disbursement or Obligation Purpose of Expenditure Category/ Phone Calls 004 Type Name of Federal Candidate Support Office Sought: House District: Pat Toomey PΑ Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 1910272.56 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Planned Parenthood Pennsylvania Advocates 06 2016 Mailing Address 1514 North 2nd Street, Harrisburg, Amount City State Zip Code 937.50 PΑ 17102 Transaction ID: B625144 Harrisburg Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 Consultant: strategy and messaging Type Name of Federal Candidate Support Office Sought: House District: Pat Toomey PΑ X Oppose President Senate State: Primary **✗** General Calendar Year-To-Date Disbursement For: 2016 1910272.56 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 2812.50 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Deirdre Schifeling [Electronically Filed] 09 15 2016 Date Signature

Schedule E)	INDENT EXPEND	TOTILS		PAGE 28 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC I	DENTIFICATION NUMBER ▼
Planned Parenthood Votes			C	C00489799
Check if 24-hour report 🗶 48-hour re	eport New repo	ort X Amends repo	rt filed on 09	08 2016
Full Name of Payee Planned Parenthood Pennsy	Ivania Advocates		M = M	ic Distribution/Dissemination
Mailing Address 1514 North 2nd Street, H	arrisburg,		Amount	06 2016
City	State	Zip Code		1875.00
Harrisburg	PA	17102		ID: B625141 oursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004		/ D D / Y D Y D
Name of Federal Candidate		Support	Office Sought:	House District:
Donald Trump		<b>X</b> Oppose	<b>x</b> President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 7	664344.29	Disbursement For: 2016 Other (s	Primary <b>x</b> General pecify) ▶
Full Name of Payee			Date of Publ	lic Distribution/Dissemination
Planned Parenthood Pennsylv	ania Advocates		09	06 / 2016
Mailing Address 1514 North 2nd Street,	Harrisburg,		Amount	
City	State	Zip Code		937.50
Harrisburg	PA	17102	Transaction I Date of Disb	ID: B625142 oursement or Obligation
Purpose of Expenditure Consultant: strategy and messaging		Category/ Type 004	M = M	/ D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
Donald Trump		<b>X</b> Oppose	<b>x</b> President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought		664344.29	Disbursement For: 2016 Other (s	Primary <b>X</b> General specify) ▶
(a) SUBTOTAL of Itemized Independent E	xpenditures			2812.50
/b) CURTOTAL of Uniterprised Independent	Cyponditures			
(b) SUBTOTAL of Unitemized Independent	Expenditures		•	495
(c) TOTAL Independent Expenditures			•	7 7
Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commit	y candidate or authorized			
Deirdre Schifeling Signature	[Electron	ically Filed] Date	09 / 15	2016
Oignaturo				

Schedule E)	DENT EXPEND	JII ONES	PAC FOR	GE 29 OF 36 R SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENT	IFICATION NUMBER ▼
Planned Parenthood Votes			C C004	189799
Check if 24-hour report 🗶 48-hour repor	t New re	port X Amends repo	rt filed on 09	08 2016
Full Name of Payee Catalist LLC				tribution/Dissemination
Mailing Address 1090 Vermont Ave./Ste. 300				06 2016
1090 vermont Ave./Ste. 300			Amount	
City	State	Zip Code		325.59
Washington	DC	20006	Transaction ID : B Date of Disbursem	625149
Purpose of Expenditure Database Services		Category/ Type 004	M = M / D	D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought: He	ouse District:
Donald Trump		<b>X</b> Oppose	✗ President Set	enate State: US
Calendar Year-To-Date Per Election for Office Sought	, , ,	664344.29	Disbursement For: 2016 Other (specify	Primary <b>x</b> General
Full Name of Payee			Date of Public Dis	tribution/Dissemination
Community Outreach Group LLC			M M / D	06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W. #3	300		Amount	
City	State	Zip Code		6418.07
Washington	DC	20005	Transaction ID : Be Date of Disbursem	
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004		D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought: H	ouse District:
Donald Trump		<b>x</b> Oppose		enate State: US
Calendar Year-To-Date Per Election for Office Sought		664344.29	Disbursement For: 2016 Other (specify	Primary <b>X</b> General
(a) SUBTOTAL of Itemized Independent Expe	nditures			6742.66
(a) Colored or Remissa maspendent Experience			7	6743.66
(b) SUBTOTAL of Unitemized Independent Ex	penditures		<b>•</b>	4
(c) TOTAL Independent Expenditures			<b>•</b>	7 1 1 4 1
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any caparty committee) any political party committee	andidate or authorize			
Deirdre Schifeling	[Electro	nically Filed] Date	09 / 15	2016
Signature				

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

ooneddie E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
Check if 24-hour report	09 08 2016
	ate of Public Distribution/Dissemination
Community Outreach Group LLC	09 06 2016
Mailing Address 1110 Vermont Ave N.W. #300	mount
City State Zip Code	38508.42
· · · · · · · · · · · · · · · · · · ·	ransaction ID : B625156 late of Disbursement or Obligation
Purpose of Expenditure Phone Calls  Category/ Type  004	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office Sc	ought: House District:
Donald Trump	esident Senate State: US
Calcillati Total To Bato	ement For: Primary 🗶 General
Per Election for Office Sought 664344.29 2016	Other (specify) ▶
Full Name of Payee Planned Parenthood Rocky Mountains Action Fund	Date of Public Distribution/Dissemination
Mailing Address 7155 E. 38th Avenue	09 06 2016 mount
City State Zip Code	1861.67
	ansaction ID : B625170 Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls  Category/ Type  004	M M / D D / Y Y Y Y Y
Name of Federal Candidate Support Office So	ought: House District:
	resident Senate State: US
Calendar Year-To-Date Per Election for Office Sought  Disburse 2016	ement For: Primary   General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	40370.09
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Deirdre Schifeling [Electronically Filed] Date 09	15 2016
Signature	

PAGE 30

OF

36

Schedule E)	ENT EXI END	THORIES		PAGE 31 OF 36 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Planned Parenthood Votes			C	C00489799
Check if 24-hour report X 48-hour report	New re	port X Amends repo	rt filed on 09	08 2016
Full Name of Payee Planned Parenthood Rocky Mou	ntains Action	Fund	Date of Public	Distribution/Dissemination
Mailing Address 7155 E. 38th Avenue			Amount	2010
City	State	Zin Codo		620.56
Denver	CO	Zip Code 80207	Transaction II	620.56 <b>D : B625171</b> rsement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004	Date of bisbu	D D / Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
Donald Trump		<b>X</b> Oppose	<b>✗</b> President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought		664344.29	Disbursement For: 2016 Other (spe	Primary <b>✗</b> General ecify) ▶
Full Name of Payee Community Outreach Group LLC			Date of Public	Distribution/Dissemination
Mailing Address 1110 Vermont Ave N.W. #30	0		Amount	06 2016
City	State	Zip Code		12836.14
Washington	DC	20005	Transaction ID	
Purpose of Expenditure Canvassing		Category/ Type 004	M - M /	D D / Y - Y - Y - Y
Name of Federal Candidate		Support	Office Sought:	House District:
Donald Trump		<b>X</b> Oppose	<b>✗</b> President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought		664344.29	Disbursement For: 2016 Other (sp	Primary <b>X</b> General ecify) ▶
(a) SUBTOTAL of Itemized Independent Expendent	litures			13456.70
(b) SUBTOTAL of Unitemized Independent Expe	enditures		. •	7
			4	4 4
(c) TOTAL Independent Expenditures			<b>)</b>	7
Under penalty of perjury I certify that the indepwith, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorize			
Deirdre Schifeling Signature	[Electro	nically Filed] Date	09 / 15	2016
Signaturo				

### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Planned Parenthood Votes	C C00489799			
Check if 24-hour report X 48-hour report New report X Amends report filed of	on 09 / 08 / 2016			
Full Name of Payee Planned Parenthood Pennsylvania Advocates	Date of Public Distribution/Dissemination			
Flatilied Falelitilood Fellisylvallia Advocates	09			
Mailing Address 1514 North 2nd Street, Harrisburg,	Amount			
City State Zip Code	937.50			
Harrisburg PA 17102	Transaction ID : B625132 Date of Disbursement or Obligation			
Purpose of Expenditure Events  Category/ Type  004	Man / Dad / Yayayay			
Name of Federal Candidate Support Office	Sought: House District:			
Donald Trump	President Senate State: US			
Calendar Year-To-Date Per Election for Office Sought  Disbur 2016	rsement For: Primary <b>X</b> General  Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
Community Outreach Group LLC	09 06 2016			
Mailing Address 1110 Vermont Ave N.W. #300	Amount			
City State Zip Code	100000.00			
Washington DC 20005	Transaction ID : B625119  Date of Disbursement or Obligation			
Purpose of Expenditure Canvassing  Category/ Type 004	M M / D D / Y Y Y Y			
Name of Federal Candidate Support Office	Sought: House District:			
Donald Trump	President Senate State: US			
Calendar Year-To-Date Per Election for Office Sought  Disbur 2016	rsement For: Primary General  Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	100937.50			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Deirdre Schifeling [Electronically Filed] Date 09	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature				

Schedule E)	ENDERT EXILIB	ITOTILO	PAGE 33 OF 36 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER	
Planned Parenthood Votes			C C00489799	
Check if 24-hour report <b>x</b> 48-hour	report New report	ort X Amends repo	ort filed on 09 / 08 / 2016	Y
Full Name of Payee Planned Parenthood Advoc	cates of Ohio		Date of Public Distribution/Dissemination	
Mailing Address 206 E State St.			09 06 2016 Amount	
City Columbus	State OH	Zip Code 43215	6475.07 Transaction ID : B625114	
Purpose of Expenditure Canvassing		Category/ Type 004	Date of Disbursement or Obligation	Y
Name of Federal Candidate		Support	Office Sought: House District:	
Donald Trump		<b>x</b> Oppose	▼ President Senate State: US	<u> </u>
Calendar Year-To-Date Per Election for Office Sought		664344.29	Disbursement For: Primary   ✓ Gene   2016 Other (specify)   ✓	ral
Full Name of Payee Planned Parenthood Advoca	tes of Ohio		Date of Public Distribution/Dissemination	
Mailing Address 206 E State St.			09	
City	State	Zip Code	3237.53	П
Columbus	OH	43215	Transaction ID : B625110  Date of Disbursement or Obligation	
Purpose of Expenditure Phone Calls		Category/ Type 004	M = M / D = D / Y = Y = Y	Y
Name of Federal Candidate		Support	Office Sought: House District:	
Donald Trump		<b>X</b> Oppose	▼ President Senate State: US	; 
Calendar Year-To-Date Per Election for Office Sought		664344.29	Disbursement For: Primary   2016  Other (specify) ▶	eral
(a) SUBTOTAL of Itemized Independent	Expenditures		··· <b>&gt;</b> 9712.60	$\neg$
(b) SUBTOTAL of Unitemized Independent	ent Expenditures			_
(c) TOTAL Independent Expenditures			··· <b>&gt;</b>	
	any candidate or authorized		not made in cooperation, consultation, or conce of either, or (if the reporting entity is not a politic	
Deirdre Schifeling Signature	[Electron	ically Filed] Date	e 09 / 15 / 2016	

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 34 OF 36 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼			
Flamed Farenthood votes	C C00489799			
Check if 24-hour report 48-hour report New report Amends report file	d on 09 08 2016			
Full Name of Payee Community Outreach Group LLC	Date of Public Distribution/Dissemination			
Mailing Address 1110 Vermont Ave N.W. #300	09 06 2016 Amount			
City State Zip Code Washington DC 20005	85618.26 Transaction ID : B625103			
Purpose of Expenditure Canvassing  Category/ Type 004	Date of Disbursement or Obligation			
Name of Federal Candidate Support Office	ce Sought: House District:			
Donald Trump X Oppose X	President Senate State: US			
Calendar Year-To-Date Per Election for Office Sought  Disk 2010	oursement For: Primary ★ General  Other (specify) ▶			
Full Name of Payee Planned Parenthood Advocates Mar Monte	Date of Public Distribution/Dissemination			
Mailing Address 1605 The Alameda	09 06 2016 Amount			
City State Zip Code San Jose CA 95126	1346.85 Transaction ID : B625189			
Purpose of Expenditure Canvassing  Category/ Type 004	Date of Disbursement or Obligation			
Name of Foderal Condidate	ce Sought: House District:			
Donald Trump  Donald Trump  Donald Trump				
Calendar Year-To-Date Per Election for Office Sought  Disl 201	bursement For: Primary General  6 Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	86965.11			
	00000.11			
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Deirdre Schifeling  [Electronically Filed] Date	M			
I I I I I I I I I I I I I I I I I I I	09 15 2016			

Schedule E)	EXI ENDII	OTIES		PAGE 35 OF 36 FOR SE OF FORM 24/48
AME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
check if 24-hour report 48-hour report	New repor	t 🗶 Amends repor		09 08 2016
Full Name of Payee Planned Parenthood Advocates Mar	Monte			of Public Distribution/Dissemination
Mailing Address			L	09 06 2016
Mailing Address 1605 The Alameda			Amou	nt
City	State Z	Zip Code	TI:	748.25
San Jose	CA 9	95126		caction ID : B625186 of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004		/ D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sough	nt: House District:
Donald Trump		<b>X</b> Oppose	<b>✗</b> Preside	ent Senate State: US
Calendar Year-To-Date Per Election for Office Sought		664344.29	Disbursement 2016	nt For:  Primary
Full Name of Payee			Date	of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Mo	onte			09 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1605 The Alameda			Amou	unt
City	State 2	Zip Code		897.90
San Jose	CA	95126		action ID : B625181 of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004		M = M / D = D / Y = Y = Y = Y
Name of Federal Candidate	<u> </u>	Support	Office Sough	nt: House District:
Donald Trump		<b>X</b> Oppose	<b>x</b> Presid	ent Senate State: US
Calendar Year-To-Date Per Election for Office Sought		664344.29	Disbursemer 2016	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures			<b>•</b>	1646.15
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	7 1 7 1 7
(c) TOTAL Independent Expenditures			•	7 7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Deirdre Schifeling Signature	[Electronic	ally Filed] Date	09	15 / 2016

So	chedule E)	ATOTILS	PAGE 36 OF 36 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
P	Planned Parenthood Votes		C C00489799
Ch	eck if 24-hour report <b>X</b> 48-hour report New rep	port X Amends repor	t filed on 09 08 2016
	Full Name of Payee Planned Parenthood Rocky Mountains Action	Fund	Date of Public Distribution/Dissemination
	Mailing Address 7155 E. 38th Avenue		09
	City State Denver CO	Zip Code 80207	310.27 Transaction ID : B625178
	Purpose of Expenditure Volunteer Recruitment	Category/ Type 004	Date of Disbursement or Obligation
	Name of Federal Candidate		Office County   House Picture.
	Donald Trump	Support  Oppose	Office Sought: House District:  ** President Senate State: US
	Calendar Year-To-Date Per Election for Office Sought	664344.29	Disbursement For:  Primary  General 2016  Gher (specify) ▶
	Full Name of Payee		Date of Public Distribution/Dissemination
	Mailing Address		Amount
	City State	Zip Code	
	Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation
	Name of Federal Candidate	Support	Office Sought: House District:  President Senate State:
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		310.27
	(b) SUBTOTAL of Unitemized Independent Expenditures		<b>•</b>
	(c) TOTAL Independent Expenditures		1083048.35
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
	Deirdre Schifeling [Electron Signature	nically Filed] Date	09 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y